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AUG 03 2004
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03000 7590 04/28/2004

**CAESAR, RIVISE, BERNSTEIN,
COHEN & POKOTILOW, LTD.
12TH FLOOR, SEVEN PENN CENTER
1635 MARKET STREET
PHILADELPHIA, PA 19103-2212**

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David M. Tener

(Depositor's name)

(Signature)

July 26, 2004

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/675,743	09/29/2000	Jeremy Mark Cohen	T1118/20040	2840

TITLE OF INVENTION: SAFETY HANDLEBAR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$0	\$665	07/28/2004
EXAMINER	ART UNIT		CLASS-SUBCLASS		
JOHNSON, VICKY A	3682		074-551100		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. CAESAR, RIVISE,
2. BERNSTEIN, COHEN &
3. POKOTILOW, LTD.

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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

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(B) RESIDENCE: (CITY and STATE OR COUNTRY)

THE CHILDREN'S HOSPITAL
OF PHILADELPHIA

Philadelphia, PA

Please check the appropriate assignee category or categories (will not be printed on the patent): individual corporation or other private group entity government

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